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FAX TRANSMISSION**DATE:** January 11, 2006**PTO IDENTIFIER:** Application Number 09/961131-Conf. #4504
Patent Number**Inventor:** Adam Ferrari et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** WILMER CUTLER PICKERING HALE AND DORR LLP
Donald R. Steinberg**PHONE:** (617) 526-6000**Attorney Dkt. #:** 0109878.00124US1**PAGES (Including Cover Sheet):** 4**CONTENTS:** Response to Restriction Requirement (1 page)
Transmittal (1 page)
Certificate of Transmission (1 page)

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PTO/SB/21 (09-04)

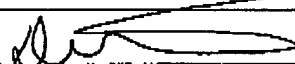
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/961131-Conf. #4504
	Filing Date	September 21, 2001
	First Named Inventor	Adam Ferrari
	Art Unit	2162
	Examiner Name	C. Y. T. Truong
Total Number of Pages in This Submission	Attorney Docket Number	0109878.00124US1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Restriction Requirement
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WILMER CUTLER PICKERING HALE AND DORR LLP		
Signature			
Printed name	Donald R. Steinberg		
Date	January 11, 2006	Reg. No.	37,241

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Dated: January 11, 2006

Signature:  (Gerri L. Bellavia)

US100CS 5464285v1

JAN 11 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.: 09/961,131 Confirmation No. 4504
Applicant: Adam J. Ferrari
Filed: September 21, 2001
TC/Art Unit: 2162
Examiner: Cam-Y T Truong

Docket No.: 109878.124
Title: SCALABLE HIERARCHICAL DATA-DRIVEN NAVIGATION SYSTEM AND
METHOD FOR INFORMATION RETRIEVAL
Customer No.: 23483

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATION UNDER 37 CFR § 1.8(a)

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Gerri L. Bellavia

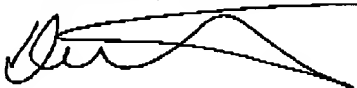
Gerri L. Bellavia

RESPONSE TO RESTRICTION REQUIREMENT

Dear Sir:

In response to the Office Action dated December 15, 2005, Applicant elects the claims directed to the invention of Group III (Claims 74-89), for prosecution without traverse. Applicant reserves the right to file divisional applications for the non-elected claims.

Respectfully submitted,



Date: January 11, 2006

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Application No. (if known): 09/961131

Attorney Docket No.: 0109878.00124US1

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